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	PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875											Application of Doctor, Number 36		
	CLAIMS AS FILED - PART I (Cotumn 1) (Cotumn 2)									SMALL E	ENTITY	OR	OTHER THAN SMALL ENTITY	
		FOR	Ī	NUMBI	ER FILED		NUMBER EXTRA			RATE	FEE		RATE	FEE
器		SIC FEE CFR 1.16(a))									\$	OR	10010	3
S		AL CLAIMS CFR 1.16(c))			minus 20					X \$ =	<u> </u>			-
	IND	EPENDENT CLA	MS	minus 3 =								OR	X \$=	
	_	CFR 1.16(b))			<u>_</u>	3 =	·			X S=		OR	X 5=	
\Rightarrow	MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))									+ \$=		OR	+ s =	
	. 11 (If the difference in column 1 is less than zero, enter "0" in column 2.								TOTAL		OR	TOTAL	
AB		Ċ	LAIM	IS AS AM	MENDED - PART II									
	V	9	-				Column 2) (Column 3)			SMALL ENTITY		OR	OTHER SMALL	
BEST AVAILABLE COPY	ENDMENT A	Filed	RE	CLAIMS MAINING AFTER ENDMENT		PRE	IGHEST UMBER EVIOUSLY ND FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
. 워	M	Total (37 CFR 1.16(c))	1	کھا	Minus		82	* M		x \$=		OR	x s =	
~~	ÆN	Independent (37 CFR 1.15(b))	•	2	Minus	***	3	- 4		× 5=		OR	x \$ =	
	AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))								+5 =		OR	+\$ = .	
										TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
		(Column 1) (Column 2) (Column 3)								•				
	ENDMENT B	Filed 9/15/05	RE	LAIMS MAINING AFTER ENDMENT		NI PRE	GHEST UMBER VIOUSLY UD FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
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	EN	Independent (37 CFR 1.16(b))	•	2	Minus	***	3	70		x s=			x \$ =	
	AM	FIRST PRESENT	ATION	N OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(d))						+5 =		OR OR		
		<u> </u>								TOTAL ADD'L FEE			TOTAL	
		. (Column 1) (Calumn 2) (Calumn 3)								ADDETEE [OR	ADD'L FEE	
	ENT C		REI	LAIMS MAINING AFTER ENDMENT		HI NI PRE	GHEST JMBER VIOUSLY JD FOR	PRESENT EXTRA		. RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
1	ENDM	Total (37 OFR 1.16(c))			Minus	••		Ξ .		x s =		00	xs -	FER
	ĮĮ.	Independent (37 OFR 1.16(b))	•		Minus	•		=		x s_ =		OR		. ——
	A	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(0))								+; =	\dashv	OR OR	X \$=	
									L	TOTAL ADD'L FEE			+ s =	
	•	If the entry in o	olumn Virmh-	1 is less that	the entry	in col	umn 2, write	o "O" in column :	3.			OR	ADD'L FEE	
	••	If the 'Highest I'	odmuv	r Previously	Paid For	IN TH	IS SPACE is	s less than 3 🚁	ente nter	* 20°.				ĺ

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.